## PART B - FEE(S) TRANSMITTAL

	FE	form should be sed for tra		or <u>Fax</u>	P.O. Box 1450 Alexandria, Vir (703) 746-4000	for Patents ginia 22313-1450	hould be completed where correspondence address as
	INSTRUCTIONS this form should be ised for transmitting the ISSUE FEE and PUBLI appropriate. All futber correspondence including the Patent, advance orders and notification indicated unless correspondence and including the Patent, advance orders and notification indicated unless correspondence and notification indicated unless correspondence address (Note: Use Block 1 for any change of address)  35741 7590 12/08/2004  KUO-HSIUNG CHIU  13F., NO.23, JIUN-HO STREET, PEITUN DISTRICT TAICHUNG, 406 TAIWAN				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
)3/03.	/2005 RMEBRAH1 0000						(Depositor's name) (Signature)
	0:1504 300.00 DP 0:1506 685.00 DP						(Date)
ſ	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/779,371 FITLE OF INVENTION:	02/17/2004 EMERGENCY SWITCH FO	R AN EXERCISE	Leao Wan APPARATUS	g	GP30-U	7898
1	APPLN. TYPE SMALL ENTITY		ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional YES \$68.			\$300	\$985	03/08/2005	
ſ	EXAMINER		ART UN	IIT	CLASS-SUBCLASS		
	RICHMAN, GLENN E		3764		482-008000	_	
(	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Fee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO			data will appear on the natent. If an assignee is identified below, the document has been filed fo			
	(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):						
7	4a. The following fee(s) are enclosed:			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
	5. Change in Entity Stat	us (from status indicated aboves SMALL ENTITY status. See	,	Deposit Account Number (enclose an extra copy of this form).  Deposit Account Number (enclose an extra copy of this form).			
; ;						isly paid issue fee to the applic egistered attorney or agent; or t	
	Authorized Signature	Lzgo wkyg	Peter	cum,	Date	02-18-2005	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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